## **Application Data Sheet**

## **Application Information**

Application number::

Filing Date:: 09/25/03
Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::
Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: LYOPHILIZED BEADS CONTAINING

MANNITOL

Attorney Docket Number:: 020048-004200US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 1

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.:: No

## **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Byung
Middle Name:: Sook

Family Name:: Moon

Name Suffix::

City of Residence:: Palo Alto

State or Province of Residence:: CA
Country of Residence:: US

Street of Mailing Address:: 2450 W. Bayshore Road #12

City of Mailing Address:: Palo Alto

State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94303

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Martin

Middle Name::

Family Name:: Jones

Name Suffix::

City of Residence:: Walnut Creek

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 1096 Snyder Lane

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City of Mailing Address:: Walnut Creek

State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94598

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Johnny

Middle Name::

Family Name:: Valdez

Name Suffix::

City of Residence:: San Jose

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 14 Uxbridge Court

City of Mailing Address:: San Jose

State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 95139

**Correspondence Information** 

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

**Domestic Priority Information** 

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

Foreign Priority Information

Country:: Application number:: Filing Date::

**Assignee Information** 

Assignee Name:: Cepheid

Street of mailing address:: 904 Caribbean Drive

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City of mailing address:: Sunnyvale

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94089